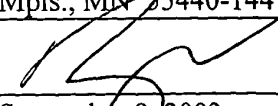
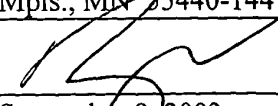
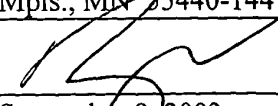


0002/PTO Rev. 6/95	U. S. Department of Commerce Patent and Trademark Office	Attorney Docket Number	1296US2
NEW UTILITY PATENT APPLICATION TRANSMITTAL <i>(to be used for new applications only)</i>		First Named Inventor	Vangstad
		Total Pages in this Submission	17

3945 U.S. PTO
 10/657966
 09/09/03

APPLICATION ELEMENTS	ACCOMPANYING APPLICATION PARTS						
<p>Notice: Checklist items mentioned under Application Elements section construct a new utility patent application. Please refer to MPEP Sections 506, 601, (37 CFR 1.77, 1.53, 35 USC 111, 112, 113) for detailed explanation regarding completeness of an original patent application</p> <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (prescribing filing fee(s))</p> <p>2. <input checked="" type="checkbox"/> Specification</p> <p style="margin-left: 20px;"> <input checked="" type="checkbox"/> Title of the Invention <input type="checkbox"/> Cross References to Related Applications (if applicable) <input type="checkbox"/> State Regarding Federally-sponsored Research Development (if applicable) <input type="checkbox"/> Reference to Microfiche Appendix (if applicable) <input checked="" type="checkbox"/> Background of the Invention <input checked="" type="checkbox"/> Brief Summary of the Invention <input checked="" type="checkbox"/> Brief Description of the Drawings (if drawings filed) <input checked="" type="checkbox"/> Detailed Description <input checked="" type="checkbox"/> Claim or Claims <input checked="" type="checkbox"/> Abstract of the Disclosure </p> <p>3. <input checked="" type="checkbox"/> Drawing(s) <i>(when necessary as prescribed by 35 USC 113)</i></p> <p>4. <input checked="" type="checkbox"/> Executed Declaration</p> <p>5. Genetic Sequence Submission <i>(if applicable, all must be included)</i></p> <p style="margin-left: 20px;"> <input type="checkbox"/> Paper Copy <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement Verifying Identical Paper and Computer Readable Copy </p>	<p>6. <input checked="" type="checkbox"/> Assignment Papers</p> <p>7. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>8. <input type="checkbox"/> Computer Program in Microfiche</p> <p>9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>10. <input type="checkbox"/> Information Disclosure Statement / PTO-1449</p> <p style="margin-left: 40px;"><input type="checkbox"/> Copies of IDS Citations</p> <p>11. <input type="checkbox"/> Petition Checklist and Accompanying Petition</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input type="checkbox"/> Proprietary Information</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard</p> <p>15. <input type="checkbox"/> Small Entity Statement</p> <p>16. <input type="checkbox"/> Additional Enclosures <i>(please identify below)</i></p>						
	<p>SIGNATURE OF APPLICANT, ATTORNEY OR AGENT (Send correspondence to:)</p> <table border="1"> <tr> <td>Firm or Individual Name</td> <td>Douglas B. Farrow Graco Minnesota Inc. P. O. Box 1441 Mpls., MN 55440-1441</td> </tr> <tr> <td>Signature</td> <td></td> </tr> <tr> <td>Date</td> <td>September 9, 2003</td> </tr> </table>	Firm or Individual Name	Douglas B. Farrow Graco Minnesota Inc. P. O. Box 1441 Mpls., MN 55440-1441	Signature		Date	September 9, 2003
Firm or Individual Name	Douglas B. Farrow Graco Minnesota Inc. P. O. Box 1441 Mpls., MN 55440-1441						
Signature							
Date	September 9, 2003						

FOR OFFICIAL USE ONLY					
Application Number		Class		Independent Claims	
Date of Receipt	Application Type	GAU		Total Claims	
	Filing Date	Foreign Filing License?		Drawings Sheets	
	Small Entity	Foreign Address?		Special Handling?	

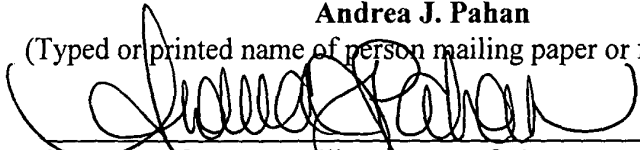
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Date of Deposit: September 9, 2003

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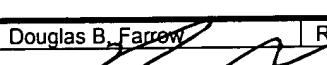


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 Free Transmittal for FY 2003 Effective 01/01/2003. Patent Fees are subject to annual revision.		Complete if Known	
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		Filing Date	
		First Named Inventor	Vangstad
		Examiner Name	
		Art Unit	
		Attorney Docket No.	1296US2
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 790.00			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																																																										
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SUBMITTED BY				(Complete (if applicable))	
Name (Print/Type)	Douglas B. Farrow	Registration No. (Attorney/Agent)	28582	Telephone	612-623-6769
Signature				Date	September 9, 2003

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